

# Summary of Benefits Report for Wyoming, CHIP

## InsureKidsNow.gov

### Preventive Services

	Is the service Covered?	Frequency	List any service - specific limitations
<b>Cleanings</b>	Yes	1 x 6 months	Not to exceed two in a year.
<b>Fluoride treatments (including fluoride varnishes)</b>	Yes	1 x 6 months	Not to exceed two in a year.
<b>Sealants (list any tooth-specific limits)</b>	Yes	1 x every 2 years	On posterior permanent teeth without caries or restorations with the occlusal surface intact.
<b>Space maintainers</b>	Yes	1 x every 3 years	To maintain space of primary teeth.

### Diagnostic Services

	Is the service Covered?	Frequency	List any service - specific limitations	Recommended age of first visit ?
<b>Oral health screening or assessment</b>	Yes	1 x 6 months	Not to exceed two in one year.	
<b>Dental examinations</b>	Yes	1 x 6 months	Not to exceed two in one year.	One year of age.
<b>Assessment of risk for tooth decay</b>	Yes	1 x 6 months	Not to exceed two in one year.	

### X-Rays

Bitewing	Yes	1 x 6 months	Not to exceed two in one year.	
Full Mouth	Yes	1 x every 3 years		
Panoramic	Yes	1 x every 3 years		

### Treatment Services

	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
<b>Anti-microbial treatments that stop decay from spreading</b>	No			
<b>Fillings</b>				
Silver amalgam	Yes		Posterior teeth.	
Tooth colored composite	Yes		Anterior teeth.	
<b>Crowns/tooth caps</b>				
Stainless steel crowns	Yes		>\$250 prior approval recommended.	
Metal (only) crowns	Yes		>\$250 prior approval recommended.	
Metal/porcelain crowns	Yes		>\$250 prior approval recommended.	
Porcelain (only) crowns	Yes		16-18 years of age; prior approval recommended.	
<b>Root Canals (endodontics)</b>				
Root canals on baby teeth (pulpotomies)	Yes		>\$250 prior approval recommended.	
Root canals on permanent teeth	Yes		>\$250 prior approval recommended.	
<b>Gum (periodontal) therapy</b>	No			
<b>Dentures</b>				

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Treatment Services				
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Partial dentures	Yes		16-18 years of age missing anterior teeth; prior authorization recommended.	
Complete dentures	No			
Bridges	No			
<b>Orthodontics*</b>				
Retainers (orthodontic)	Yes		If deemed medically necessary.	
Braces	No			
<b>Oral surgery</b>				
Simple extractions	Yes		>\$250 prior approval recommended.	
Surgical extractions	No			
Care of abscesses	Yes		If deemed medically necessary; prior approval required.	
Cleft palate treatment	No			
Cancer treatment	No			
Treatment of fractures	No			
Biopsies	Yes		If deemed medically necessary.	
Treatment of jaw joint problems (TMJ)	No			
Emergency room services provided by a dentist	Yes		If deemed medically necessary.	
Inpatient Hospital Services	No			
<b>Anesthesia</b>				
General anesthesia	No			
Intravenous conscious sedation	Yes		If deemed medically necessary.	
Non-intravenous conscious sedation	Yes		>\$250 prior approval recommended.	
Analgesia (nitrous oxide)	No			

\* When this information is posted on the Insure Kids Now website, we will include a special note for orthodontic services explaining that parents and caretakers should work with their child's orthodontist to ensure that the treatment and payment terms and conditions are clear at the outset of treatment (for example, what happens in the case of a child who becomes ineligible for Medicaid or CHIP while he or she is undergoing orthodontic treatment?).